



CERTIFICATE OF INSURANCE - COMBINED LIABILITY POLICY

We confirm that we have effected cover for Employers Liability, Public/Products Liability, Personal Accident, Legal Expenses and Professional Indemnity Insurance on your behalf in accordance with Electrical Contractors Combined Policy No. **UT569334132/15317**

Brief Details are set out hereunder:-

Insured: PAT EXPERTS LTD

Address: 94 MARTINS ROW DUBLIN 20 D20 W861

Business Description Electrical Contractor

Period of Indemnity/Insurance From: **25/06/2024** To: **24/06/2025**

Section 1 – Combined Liability

AMOUNT OF INDEMNITY

Occurrences:

Occurrence 1 Employers Liability (any one event and inclusive of costs) €20,000,000

Occurrence 2 Public Liability (any one event) €6,500,000

Occurrence 3 Products Liability (any one Period of Indemnity) €6,500,000

Section 2 – Personal Accident (Permanent total disablement from usual occupation/Death) €25,000

Section 3 – Commercial legal protection

Section 4 - Professional Indemnity (any one Period of Insurance) €250,000

For restrictions, extensions and conditions of cover, see copy Policy.

Section 1 Occurrence 2 excess - €320.00 property damage only

Section 1 Occurrence 3 excess - €320.00 property damage only

Section 4 excess - €1,000 each and every claim

Signed on behalf of the Company

by Authority of the Board

Insurer: Aviva Insurance Limited

Building 12,

Cherrywood Business Park,

Loughlinstown, Dublin 18.

Countersigned on behalf of Arachas

Arachas Corporate Brokers Ltd

Sandyford Business Estate,

Dublin 18

Phone:(01)213 5000 Fax:(01)213 5001

This certificate is subject to the terms, conditions and exceptions of the policy, a copy of which has been issued to you.

E. & O. E.





So far as concerns Section 4 Exception 16 the Retroactive date is 25/06/2021

Section 4 – Professional Indemnity is added to the Policy with effect from 25 Jun 2021. The Retroactive date in respect of Section 4 – Professional Indemnity is 25 Jun 2021.

MEMO 02

The premium for this policy has been calculated on estimates given by the insured and following the expiry of each period of Indemnity the insured shall supply to the Company a correct statement of their gross wages/salaries, in the form of a certified Auditors Certificate, so that the premium for the period shall be calculated and the difference paid by the Insured. Notwithstanding anything contained/expressed above the minimum premium to be retained by the company under any of the occurrences insured under this policy shall be specified in the brokers invoice or any other minimum premium subsequently applied to the policy.

MEMO 21:

This policy does not cover or indemnify the Insured in respect of any liability loss damage cost expense or any other benefit of whatsoever nature where the provision of any payment in respect of such liability loss damage cost expense or any other benefit under this policy would expose the Company to any sanction, prohibition or restriction under United Nations resolutions or any trade or economic sanctions laws or regulations, including those of the European Union, United Kingdom and United States of America .

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STATEMENT OF FACT

THIS IS AN IMPORTANT SECTION OF YOUR DOCUMENT SO PLEASE READ IT IN FULL

This Statement of Fact is a record of the current information held by us in relation to the questions contained within this document. These answers are used to determine the renewal of your insurance and calculate the premium, exceptions, terms, and conditions, on which your policy is based. Aviva Insurance Ireland DAC is the underwriter of this product, with a registered office address at One Park Place, Hatch Street, Dublin 2, D02 E651.

The information contained within this Statement of Fact and any other document(s) previously provided by you to us, together with your schedule of insurance and policy booklet, will form the contract between you and Aviva Insurance Ireland DAC for the period of insurance as stated in your enclosed policy renewal invite.

PLEASE READ THIS STATEMENT OF FACT CAREFULLY - You must check that all information contained in this Statement of Fact and the Schedule of Insurance is correct. Some information held may be inaccurate (for example due to system migrations overtime). If any information shown on this Statement of Fact is incorrect or incomplete, please contact your intermediary, broker or Arachas immediately to update this information.

Please remember that you are under a duty to answer all questions, which we ask, honestly and with reasonable care. Please ensure all answers and information given in this Statement of Fact and any other document(s) previously provided by you or your broker to us are complete and accurate and tell us if anything changes during the period of insurance. This is for your own protection as if you **do not exercise this duty:**

- your policy may not provide you with the cover you need,
- a claim may not be paid,
- the policy could be declared invalid and void or may be cancelled,
- you may encounter difficulties trying to purchase insurance elsewhere and
- you may breach the terms and conditions attaching to any loan.

Renewing this policy is deemed to be an acceptance that the information we hold, as outlined in this Statement of Fact document, is correct and has not altered.

Please note - any subsequent alterations to this Statement of Fact take precedence over the information contained within this version.

You should keep copies of any supplementary questionnaires, documents, or letters you may be asked to supply to us as part of your application for insurance, for your future reference.



Declaration

I declare that:

- (1) the statements and information recorded in this Statement of Fact document, Broker Submission*, and any other document(s) provided by me or my intermediary, broker or Arachas are true, complete, and accurate,
- (2) I have not, misrepresented, or misstated any information.

By proceeding with this policy, I agree that the information my broker and I have provided was used by Aviva to:

- (a) agree to accept my application for this insurance,
- (b) calculate my premium, and
- (c) set the exceptions, terms, and conditions on which my policy has been issued.

I acknowledge that the answers and information as outlined in this Statement of Fact document, Broker Submission*, and any documentation provided by me, together with the policy booklet, and schedule, will form my contract with Aviva Insurance Ireland DAC. I understand that my information will be used for the purposes set out in the Data Protection – Privacy Notice section overleaf.

*Broker Submission means any information, (including any clarifications provided to us by your broker when arranging this insurance policy), supplementary questionnaires, documents, or letters you or your broker has supplied to us, for the purpose of taking out this policy.



Additional Duty of Disclosure for Non-Consumer Customers

PLEASE NOTE - IF YOU ARE NOT A CONSUMER (AS DEFINED BELOW) THE FOLLOWING DUTY ALSO APPLIES.

In addition to the above, you must also tell us about any other facts, which are likely to affect whether we agree to provide cover, or how we assess the risks proposed for insurance.

If you are not sure whether you should tell us about something, please tell us anyway. This is for your own protection because, if you do not give us all the information we need, the policy may not provide you with the cover you need, a claim may not be paid, the policy may be declared invalid and void or may be cancelled, and you may encounter difficulty trying to purchase insurance elsewhere. Where applicable, you should also be aware that failure to have property insurance in place could lead to a breach of the terms and conditions attaching to any loan secured on that property.

Consumer Definition:

Consumer means a 'consumer' as defined by section 2(1) of the Financial Services and Pension Ombudsman Act 2017. For the avoidance of doubt, the definition of 'consumer' shall include:

- (i) a natural person, not acting in the course of business,
- (ii) a sole trader, partnership, trust club or charity (not being a body corporate), with an annual turnover in its previous financial year (within the meaning of section 288 of the Act of 2014) of €3 million or less, or
- (iii) an incorporated body that
 - (a) had an annual turnover in its previous financial year (within the meaning of section 288 of the Act of 2014) of €3 million or less, and
 - (b) is not a body corporate that is a member of a group of companies (within the meaning of section 8 of the Act of 2014) with a combined annual turnover (in the previous financial year (within the meaning of section 288 of the Act of 2014) of the group of companies), of greater than €3 million.



You, the Policyholder / Insured

Our question	Your answer
Is the name of the Insured recorded on the Policy Schedule correct?	Yes
Is the Address of the Insured recorded on the Policy Schedule correct?	Yes
Are you resident in the Republic of Ireland or in the case of a company registered in the	Yes
Republic of Ireland?	

Your Business

Our question	Your answer
Is your business recorded on the Policy Schedule correct?	Yes
To the best of your knowledge and belief have you or any other person(s) material	
to this risk ever been refused any insurance, renewal or had any special terms or	
conditions imposed by any insurer?	No
To the best of your knowledge and belief have you or any other person(s) material	
to this risk ever been convicted* of or charged (but not yet tried) or been given an Adult	
Caution or any other similar caution in respect of any criminal offence other than a	
motoring offence?	No
* An individual is not required to disclose a spent conviction when supplying information on	
past convictions. To determine whether or not a conviction is a 'spent conviction' under the	
Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016 please visit	
www.irishstatutebook.ie	
Have you or any principal in the business or any company in which you have had	
an interest ever been declared bankrupt or insolvent, been the subject of Court Judgement	No
(including a court enforcement order enforced by as sheriff, bailiff, or other similar person	
or body), liquidation, receivership, examinership, court approved compromise with	
creditors or any other insolvency arrangement or been disqualified from being a company	
director?	
Does the business undertake any operations outside of the Republic of Ireland?	
	No
Have you entered into any agreements assuming liability for injury, illness, loss or damage	
for which you would not have been liable in the absence of such agreements?	No
Do you work on or in boats, ships, airports or aircraft, or on offshore Platforms or Rigs?	No
Do you manufacture, supply or use goods which are poisonous or dangerous, used in:	
Petrochemical or Aerospace industries, Computer industry, explosives, toxic or corrosive	No
chemicals or gases, welding or blow-lamp equipment, asbestos, silica or other substance	
involving a health hazard?	
Have you ever suffered any claim or loss (whether insured or not) in connection with	
Employers, Public or Products Liability over the last 3 years?	No
Does the business involve use of radioactive substances or other sources of ionising	No
radiation?	
Please advise if you have answered 'Yes to any of the above questions	



Employee Details

Our question	Your answer
How many principals work manually in the business	1
How many employees work manually in the business	4
How many clerical employees work in the business	2
What payments will be made to insured Labour only sub-contractors	€ 0
What payments will be made to uninsured Labour only sub-contractors	€3,000
What payments will be made to Bona Fide sub-contractors	€145,000

Your occupation is described as:

Electrical Contractor